

## FEE TRANSMITTAL

Electronic Version v08

Stylesheet Version v08.0

| Title of Invention   | COLOR ELECTRODE ARRAY PRINTER |           |             |                                      |                                    |                 |           |             |                    |                   |   |          |  |      |                        |    |      |    |   |  |  |                                    |  |                                      |
|--|-------------------------------|-----------|-------------|--------------------------------------|------------------------------------|-----------------|-----------|-------------|--------------------|-------------------|---|----------|--|------|------------------------|----|------|----|---|--|--|------------------------------------|--|--------------------------------------|
| Application Number :<br>Date :<br>First Named Applicant: Yung-Shane Liaw<br>Attorney Docket Number: ACMP0044USA  |                               |           |             |                                      |                                    |                 |           |             |                    |                   |   |          |  |      |                        |    |      |    |   |  |  |                                    |  |                                      |
| <b>TOTAL FEE AUTHORIZED \$ 810</b>   |                               |           |             |                                      |                                    |                 |           |             |                    |                   |   |          |  |      |                        |    |      |    |   |  |  |                                    |  |                                      |
| Patent fees are subject to annual revisions on or about October 1st of each year.  |                               |           |             |                                      |                                    |                 |           |             |                    |                   |   |          |  |      |                        |    |      |    |   |  |  |                                    |  |                                      |
| Filing as large entity   |                               |           |             |                                      |                                    |                 |           |             |                    |                   |   |          |  |      |                        |    |      |    |   |  |  |                                    |  |                                      |
| <b>BASIC FILING FEE</b>  |                               |           |             |                                      |                                    |                 |           |             |                    |                   |   |          |  |      |                        |    |      |    |   |  |  |                                    |  |                                      |
| <table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Utility Filing Fee</td><td>1001</td><td>770</td><td>770</td></tr><tr><td colspan="4">Subtotal For Basic Filing Fees: \$ 770</td></tr></tbody></table>  |                               |           |             |                                      | Fee Description                    | Fee Code        | Amount \$ | Fee Paid \$ | Utility Filing Fee | 1001              | 770   | 770      | Subtotal For Basic Filing Fees: \$ 770 |      |                        |    |      |    |   |  |  |                                    |  |                                      |
| Fee Description  | Fee Code                      | Amount \$ | Fee Paid \$ |                                      |                                    |                 |           |             |                    |                   |   |          |  |      |                        |    |      |    |   |  |  |                                    |  |                                      |
| Utility Filing Fee   | 1001                          | 770       | 770         |                                      |                                    |                 |           |             |                    |                   |   |          |  |      |                        |    |      |    |   |  |  |                                    |  |                                      |
| Subtotal For Basic Filing Fees: \$ 770   |                               |           |             |                                      |                                    |                 |           |             |                    |                   |   |          |  |      |                        |    |      |    |   |  |  |                                    |  |                                      |
| <b>EXTRA CLAIM FEES</b>  |                               |           |             |                                      |                                    |                 |           |             |                    |                   |   |          |  |      |                        |    |      |    |   |  |  |                                    |  |                                      |
| <table border="1"><thead><tr><th>Fee Description</th><th>Extra Claim</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Total Claims : 17</td><td>0</td><td>1202</td><td>18</td><td>0</td></tr><tr><td>Independent Claims : 1</td><td>0</td><td>1201</td><td>86</td><td>0</td></tr><tr><td colspan="4"></td><td>Subtotal For Extra Claims Fees: \$ 0</td></tr></tbody></table> |                               |           |             |                                      | Fee Description                    | Extra Claim     | Fee Code  | Amount \$   | Fee Paid \$        | Total Claims : 17 | 0   | 1202     | 18                                     | 0    | Independent Claims : 1 | 0  | 1201 | 86 | 0 |  |  |                                    |  | Subtotal For Extra Claims Fees: \$ 0 |
| Fee Description  | Extra Claim                   | Fee Code  | Amount \$   | Fee Paid \$                          |                                    |                 |           |             |                    |                   |   |          |  |      |                        |    |      |    |   |  |  |                                    |  |                                      |
| Total Claims : 17  | 0                             | 1202      | 18          | 0                                    |                                    |                 |           |             |                    |                   |   |          |  |      |                        |    |      |    |   |  |  |                                    |  |                                      |
| Independent Claims : 1   | 0                             | 1201      | 86          | 0                                    |                                    |                 |           |             |                    |                   |   |          |  |      |                        |    |      |    |   |  |  |                                    |  |                                      |
|  |                               |           |             | Subtotal For Extra Claims Fees: \$ 0 |                                    |                 |           |             |                    |                   |   |          |  |      |                        |    |      |    |   |  |  |                                    |  |                                      |
| <b>ASSIGNMENT FEES</b>   |                               |           |             |                                      |                                    |                 |           |             |                    |                   |   |          |  |      |                        |    |      |    |   |  |  |                                    |  |                                      |
| <table border="1"><thead><tr><th>Fee Description</th><th>Property Number</th><th>Quantity</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Recording Each Patent Assignment Per Property Fee</td><td>00000000</td><td>1</td><td>8021</td><td>40</td><td>40</td></tr><tr><td colspan="5"></td><td>Subtotal For Additional Fees: \$40</td></tr></tbody></table>                |                               |           |             |                                      | Fee Description                    | Property Number | Quantity  | Fee Code    | Amount \$          | Fee Paid \$       | Recording Each Patent Assignment Per Property Fee | 00000000 | 1                                      | 8021 | 40                     | 40 |      |    |   |  |  | Subtotal For Additional Fees: \$40 |  |                                      |
| Fee Description  | Property Number               | Quantity  | Fee Code    | Amount \$                            | Fee Paid \$                        |                 |           |             |                    |                   |   |          |  |      |                        |    |      |    |   |  |  |                                    |  |                                      |
| Recording Each Patent Assignment Per Property Fee  | 00000000                      | 1         | 8021        | 40                                   | 40                                 |                 |           |             |                    |                   |   |          |  |      |                        |    |      |    |   |  |  |                                    |  |                                      |
|  |                               |           |             |                                      | Subtotal For Additional Fees: \$40 |                 |           |             |                    |                   |   |          |  |      |                        |    |      |    |   |  |  |                                    |  |                                      |
| <b>AUTHORIZED BILLING INFORMATION</b>  |                               |           |             |                                      |                                    |                 |           |             |                    |                   |   |          |  |      |                        |    |      |    |   |  |  |                                    |  |                                      |
| <b>The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</b>  |                               |           |             |                                      |                                    |                 |           |             |                    |                   |   |          |  |      |                        |    |      |    |   |  |  |                                    |  |                                      |
| Deposit account number: 503105   |                               |           |             |                                      |                                    |                 |           |             |                    |                   |   |          |  |      |                        |    |      |    |   |  |  |                                    |  |                                      |
| Access Code ****   |                               |           |             |                                      |                                    |                 |           |             |                    |                   |   |          |  |      |                        |    |      |    |   |  |  |                                    |  |                                      |
| Deposit name: North America Intellectual Property Corporation  |                               |           |             |                                      |                                    |                 |           |             |                    |                   |   |          |  |      |                        |    |      |    |   |  |  |                                    |  |                                      |
| Deposit authorized name: WINSTON HSU   |                               |           |             |                                      |                                    |                 |           |             |                    |                   |   |          |  |      |                        |    |      |    |   |  |  |                                    |  |                                      |
| Signature: VAEB-JMXX-8IIL  |                               |           |             |                                      |                                    |                 |           |             |                    |                   |   |          |  |      |                        |    |      |    |   |  |  |                                    |  |                                      |

Date (YYYYMMDD):

2004-05-11

Charge Assignment Fees Required Under 37 C.F.R. Section 1.21 (h).

Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.